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**Date:** January 20, 2004  
**To:** Examiner Edward Raymond  
**Company:** USPTO  
**From:** Caleb Pollack  
**Your Ref.:** 10/086,633  
**Our Ref.:** P-1471-US1 (176984)  
**Subject:** PERSONAL AMBULATORY CELLULAR HEALTH MONITOR  
**Fax No.:** (703) 746-4447  
(571) 273-2221  
**# of Pages:** 21

**Message:**

Attached please find a Response to the Final Office Action mailed July 16, 2003.

Please contact me should you have any questions.

Yours sincerely,

  
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Applicant(s): GEVA, Jacob et al.		EPLC Docket No.: P-1471-US1	
Serial No. / Patent No.: 10/086,633		Hand Delivered on: Jan 14, 2004	
Title: PERSONAL AMBULATORY CELLULAR HEALTH MONITOR			
1. <input type="checkbox"/> Provisional Cover Sheet	9. <input type="checkbox"/> Response to Notice to File Missing Parts		
2. <input type="checkbox"/> Utility Patent Application Transmittal	10. <input type="checkbox"/> Response to Notice of Incomplete Reply		
3. <input type="checkbox"/> RCE Transmittal Sheet	11. <input type="checkbox"/> Request for Correction of Filing Receipt		
4. <input type="checkbox"/> Fee Transmittal Sheet	12. <input type="checkbox"/> Information Disclosure Statement including: - Form PTO 1449 and references _____		
5. <input type="checkbox"/> Patent Application Under 35 USC 111(a)	13. <input type="checkbox"/> Preliminary Amendment		
<input type="checkbox"/> Provisional Patent Application Under 35 USC 111(b)			
<input type="checkbox"/> Transmittal Sheet for Entering National Phase	14. <input checked="" type="checkbox"/> Amendment to Office Action dated July 16, 2003		
Containing:		15. <input checked="" type="checkbox"/> Petition for a Three Month(s) Extension of Time	
____ Pages of Specification	16. <input type="checkbox"/> Notice of Appeal <input type="checkbox"/> Appeal Brief _____		
____ Pages of Claims	17. <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Publication Fee		
____ Page of Abstract	18. <input type="checkbox"/> Submission of Formal Drawings: Two sets of _____ Sheets containing Figs. _____		
____ Pages of Formal Drawings	19. <input type="checkbox"/> Certified Copy of Priority Doc.		
____ Pages of _____	20. <input type="checkbox"/> Claim for Convention Priority		
6. <input type="checkbox"/> Signed Declaration & Power of Attorney	21. <input type="checkbox"/> Revocation and Power of Attorney, including: - Statement Under 37 CFR 3.73(b) - Copy of Assignment		
7. <input type="checkbox"/> Request for Correction of Recordation of Assign. and: - Recordation Cover Sheet - Copy of Notice of Recordation of Assign.	22. <input checked="" type="checkbox"/> Other: <u>EXT OF TIME</u>		
8. <input type="checkbox"/> Recordation of Assign. Cover Sheet & Signed Assign.			

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